PATENT APPLICATION FEE DETERMINATION RECORD									Application or Docket Number			
Effective December 8, 2004									10/553703			
		CLAIMS	AS FILE		-			SMALL EN	TITY	OR	OTHER THAN SMALL ENTITY	
	LAIONTAN 2	STAGE FEES	(Column 1)		(Column 2)		1			יי ד		CMILLA
U.S. NATIONAL STAGE FEES				CMALL ENT - 6 450				RATE	FEE //	4	RATE	FEE
BASIC FEE			SMALL ENT. = \$ 150 Satisfies PCT Article 33(1)-			GE ENT. = \$ 300 Other situations =		BASIC FEE	150	OR	BASIC FEE	<u> </u>
EXAMINATION FEE			(4) = \$	(4) = \$50/\$100 U.S. is ISA = \$50/\$100		\$ 100 / \$ 200		EXAM. FEE	50		EXAM. FEE	
SEARCH FEE			ALL other countries = \$200/\$400		ALL other situations = \$ 250 / \$ 500			SEARCH FEE	100		SEARCH FEE	
FEE FOR EXTRA SPEC. PGS.			minus 100 =		/ 50 =			X \$ 125 =	125		X \$ 250 =	1
TOTAL CHARGEABLE CLAIMS			26	minus 20 =	. 6			X \$ 25 =	154)	OR	X \$ 50 =	1
INDEPENDENT CLAIMS			/) minus 3 =		*			X \$ 100 =		OR	X \$ 200 =	
MUI	LTIPLE DEPEN	IDENT CLAIM PR	ESENT					+\$ 180 =		OR	+ \$ 360 =	1
* If the difference in column 1 is less than zero, enter "0" in column 2						olumn 2	1	TOTAL		OR	TOTAL	
		(Column 1) CLAIMS REMAINING AFTER	AWENDE	(Colum	nn 2) EST BER	(Column 3) PRESENT EXTRA	Į.	SMALL E	ADDI- TIONAL	OR	OTHER SMALL E	
		AMENDMENT		PAID F		EXIIVA			FEE			FEE
AMENDMENT	Total	*	Minus	**		=		X \$ 25 =		OR	X \$ 50 =	
AME	Independent	*	Minus	***		=		X \$ 100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						L	+ \$ 180 =		OR	+ \$ 360 =	
			-					TOTAL ADDIT. FFF		ÖR	TOTAL ADDIT. FFF	
		(Column 1)		(Colum	n 2)	(Column 3)		<u> </u>				
AMENDMENT 8		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	ſ	X \$ 25 =		OR	X \$ 50 =	
	Independent	*	Minus	***		=		X \$ 100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT C				LAIM			+ \$ 180 =		OR	+ \$ 360 =	
							_	TOTAL ADDIT. FFF		OR	TOTAL ADDIT. FFF	
					-			•			_	
***	If the "Highest Nut If the "Highest Nu	umn 1 is less than the umber Previously Pai umber Previously Pai unber Previously Paid	d For" IN THIS d For" IN THIS	SPACE is less SPACE is less	than '20 than '3'.)', enter "20".	the	appropriate box	in column 1.			

FORM PTO-875 (Rev. 02/2005)

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